| Case 1:20-cr-0006 | 4-QM Document 20 Filed | F 10/1 5/20 Page 1 of 2 |
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| | USDC SDNY | |
| | DOCUMENT | |
| | ELECTRONICALLY FIL | ED |
| | DOC #: | |
| UNITED STATES DISTRICT COU | RT DATE FILED: 0 15 | of of old to |
| SOUTHERN DISTRICT OF NEW | | WAIVER OF RIGHT TO BE PRESENT AT |
| | X | CRIMINAL |
| UNITED STATES OF AMERICA | | PROCEEDING AND |
| -V- | | CONSENT TO PROCEED |
| • | | VIA VIDEO OR |
| JUDE SONE , | | TELEPHONE CONFERNCE |
| | Defendant. | 20 CR ₆₄ (CM) |
| | X | 04. |
| Check Proceeding that Applie | <u>25</u> | |
| X Entry of Plea of Guilty | | |
| my attorney about the to certain charges via before a judge in a configuration of guilty and to have public health emergent travel and restricted issues with my attorn willingly give up my guilty. By signing this any right I might have following conditions proceeding and to be | ose charges. I have decided the Video/Teleconference. I undouttroom in the Southern District my attorney beside me as ency created by the COVID-19 di access to the federal country. By signing this document, right to appear in person before document, I also wish to advis to have my attorney next to me are met. I want my attorney able to speak on my behalf do | federal law. I have consulted with nat I wish to enter a plea of guilty derstand I have a right to appear ict of New York to enter my plea I do. I am also aware that the pandemic has interfered with orthouse. I have discussed these I wish to advise the court that fore the judge to enter a plea of se the court that I willingly give up as I enter my plea so long as the proceeding. I also wan any time during the proceeding. |
| Date: Jude Sone | /s | s/ Jude Sone by Martin Cohen |

| Date: | Jude Sone | /s/ Jude Sone by Martin Cohen | |
|-------|------------|-------------------------------|--|
| | Print Name | Signature of Defendant | |
| | | | |

__ Sentence

I understand that I have a right to appear before a judge in a courtroom in the Southern District of New York at the time of my sentence and to speak directly in that courtroom to the judge who will sentence me. I am also aware that the public health emergency created by the COVID-19 pandemic has interfered with travel and restricted access to the federal courthouse. Accordingly, I wish to be sentenced via Video/Teleconference. I do not wish to wait until the end of this emergency to be sentenced.

I have discussed these issues with my attorney and willingly give up my right to be present, at the time my sentence is imposed, in the courtroom with my attorney and the judge who will impose that sentence. By signing this document, I wish to advise the court that I willingly give up my right to appear in a courtroom in the Southern District of New York for my sentencing proceeding as well as my right to have my attorney next to me at the time of sentencing on the following conditions. I want my attorney to be able to participate in the proceeding and to be able to speak on my behalf at the proceeding. I also want the ability to speak privately with my attorney at any time during the proceeding if I wish to do so.

| Date: | | |
|------------------------------|--|--|
| | Print Name | Signature of Defendant |
| client, my c this waiver, | lient's rights to attend and pa and this waiver and consent f | gation to discuss with my client the charges against morticipate in the criminal proceedings encompassed by orm. I affirm that my client knowingly and voluntaribith my client and me both participating remotely. |
| Date: | Martin Cohen | /s/ Martin Cohen |
| | Print Name | Signature of Defense Counsel |
| I used the so | • | cuss these issues with the defendant. The interpreterety, to the defendant before the defendant signed it. |
| Date: | Signature of Defense Cour | nsel |
| Accepted: | Signature of Judge Date: 10/15 pro W | |